Name in Full Abey

Certificate of Death

Died near Town Trappe County Talbot Co. MARYLAND

Date 1899 Month 6 Day 11 | Age Y. 33 M. - D. - | Native of Talbot. | Occupation Wife -

~~Male~~ Female | White ~~Colored~~ | Married ~~Single~~ | ~~Widow~~ ~~Widower~~ ~~Divorced~~ | Number of children living 8.

~~Husband~~ Wife of Rosanna Wheatley -

Father's Name Samuel Abey - Mother's Name Mary E. Chance

Cause of Death: ~~Primary~~ 15-5-6

Immediate Heart Failure -

How long sick 10 minutes

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by L. K. Mullikin Undertaker

Address Trappe Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU. 85968

Name In Full — Certificate of Death

Ex-Sheriff Thomas F. Briggs

Died at Town near Bozman County Talbot MARYLAND

Date 189	Month	Day	Y.	M.	D.	Native of	Occupation
9	6	23	Age 65	—			

Male ~~Female~~ White ~~Colored~~ Married Single Widow Widower Divorced Number of children living

Husband of
Wife

Father's Name

Mother's Name

Cause of Death — Primary: 161 — How long sick

Immediate — Accident, Suicide, Homicide

Reported by Easton Star Democrat

Address 6-6

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 73998

Name In Full — Captain

Certificate of Death

Town — County Talbot (?)

Died at — MARYLAND

Dete 189	Month	Day	Age Y.	M.	D.	Native of	Occupation
of	6 —	26					

Male / ~~Female~~	~~White~~ / Colored	Married / Single	Widow / Widower	Divorced / Number of children living

Husband of
Wife

Fether's Name — Lt. Caplan

Mother's Name

Cause of Death	Primery	Stillborn	How long sick
	Immediate		Accident, Suicide, Homicide

Reported by — T. A. Dodson,

Address — St. Michael's, Md.

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 74008

Name in Full Joseph Wingate Culver

Certificate of Death

Died at Town Easton County Talbot MARYLAND

Date 1899 Month June Day 17 Age Y. 8 M. 23 D. Native of Easton Occupation X

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children~~ living

~~Husband~~ ~~Wife~~ of X

Father's Name Elijah Culver

Mother's Name Sarah Culver

Cause of Death Primary Indigestion

Immediate Cholera Infantum

How long sick one week

~~Accident, Suicide, Homicide~~

Reported by E. R. Tuppe

Address Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 6596R

Name in Full

Certificate of Death

Sarah Miranda Green

Died near Town Trappe County Talbot MARYLAND

Date 1899.	Month 6	Day 7	Age Y. 14	M. –	D. 22	Native of Talbot Co	Occupation —

~~Male~~ Female ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~

Number of children living One

~~Husband~~ ~~Wife~~ of —

Father's Name Samuel Cator Green

Mother's Name Sarah Miranda Brumund

Cause of Death: Primary Post-puerperal Eclampsia — How long sick 3 days

Immediate Coma — 121

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by Joseph A Ross M D

Address Trappe Tal [redacted] bot Co Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65965

Name in Full

Certificate of Death

Willis Green

Died at Town Almshouse County Talbot MARYLAND

Date 189 9 Month Jun Day 22 Age Y. 76 M. D. Native of Talbot Co Occupation Laborer

Male ~~Female~~ ~~White~~ Colored ~~Married~~ ~~Single~~ ~~Widow~~ Widower ~~Divorced~~ Number of children living

Husband / Wife of cont find out

Father's Name " " "

Mother's Name Cont find out 5-7

Cause of Death: Primary Rheumatism - Dropsy — How long sick 1 yr

Immediate Hypertrophy of Heart - Syncope — Accident, Suicide, Homicide

Reported by Jas. B. Merritt

Address Easton Md

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full — Certificate of Death

Mrs Jane Spear Harrison

Died at Town: Oxford County: Talbot MARYLAND

Date 189? Month: June Day: 25 | Age Y.: 74 M.: 3 D.: 5 | Native of: Md | Occupation: None

~~Male~~ / Female — White / ~~Colored~~ — ~~Married~~ / ~~Single~~ / Widow / ~~Widower~~ — ~~Divorced~~

Number of children living 1

~~Husband~~ / Wife of Madore E. S. Harrison

Father's Name: John S. Stiles | Mother's Name: Emory F. Stiles

Cause of Death — Primary: Consumption | How long sick: One year

Immediate: Diarrhoea 22a | ~~Accident, Suicide, Homicide~~

Reported by J. A. Stevens M. D.

Address Oxford

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full Certificate of Death

Mary Ann Kemp

Died at Town Easton County Talbott MARYLAND

Date 1897 Month June Day 25 Age Y. 36 M. 2 D. – Native of Talbot Occupation House wife

~~Male~~ White Married ~~Widow~~ ~~Divorced~~

Female ~~Colored~~ ~~Single~~ ~~Widower~~ Number of children living One

Husband / Wife of Thomas Fisher Kemp

Father's Name Chas. R. Mulliken Mother's Name Evelina Mulliken

Cause of Death Primary Diabetes How long sick 3 days

Immediate Diabetic Coma ~~Accident, Suicide, Homicide~~

Reported by E. R. Tuppe

Address Easton Md Over

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

It was not known that she had Diabetes until the Coma came on—

Name in Full

Certificate of Death

Henry Connell

Died near Town Trappe County Talbot MARYLAND

Date 1899 Month 6 Day 23. Age Y. 65 M. - D. - Native of Md- Occupation Laborer

Male ~~Female~~ ~~White~~ Colored ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name Edmond Smith Mother's Name Eliza Connell

Cause of Death: Primary Urethral Stricture — How long sick 6 weeks.

Immediate Cystitis & Acute Nephritis. ~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by Joseph A Ross Md

Address Trappe Talbot Co, Md-

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full — Joseph E. Robinson — Certificate of Death

Died at — Town: Easton — County: Talbot — MARYLAND

Date 189 — Month: June — Day: 7 — Age: Y. 48 M. 6 D. — Native of: Pa — Occupation: Laborer

Male / ~~Female~~ — ~~White~~ / Colored — Married / ~~Single~~ / ~~Widow~~ / Widower — ~~Divorced~~ — Number of children living: 4

Husband / Wife of: Sarah E. Robinson

Father's Name — Mother's Name — 22a

Cause of Death — Primary: Pulmonary Tuberculosis — How long sick: 1 yr.

Immediate: Heart Failure — ~~Accident Suicide Homicide~~

Reported by: C. B. Merritt

Address: Easton Md

OVER

OVER

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79708

Attended by Dr. Connell, Johnson, Merritt

of Easton

The undertaker was John Mason

of Easton

Information contained in this certificate received from Gerald E. Robinson

of Easton Md

Name in Full

Certificate of Death

Saulsbury

Died near Town Trappe County Talbot MARYLAND

Month	Day	Age	Native of	Occupation
6	24	4 hours	Md-	—

Date 1899

Male ~~Female~~ White ~~Colored~~ ~~Married~~ Single ~~Widow~~ ~~Widower~~ ~~Divorced~~ ~~Number of children living~~

~~Husband~~ ~~Wife~~ of

Father's Name Charles H Saulsbury

Mother's Name Ida May White

Cause of Death: Primary Premature Labor.

Immediate Inanition.

How long sick 4 hours

~~Accident~~, ~~Suicide~~, ~~Homicide~~

Reported by Joseph A Ross M D

Address Trappe, Tal- Co Md-

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 65968

Name in Full

Certificate of Death

Mrs. Sarah Williams

Died at Town: Bellevue County: Talbot MARYLAND

Date 189? Month: 6 Day: 26 | Age: Y. 78 M. D. | Native of | Occupation

~~Male~~ Female | White ~~Colored~~ | ~~Married~~ ~~Single~~ | Widow Widower | Divorced Number of children living

Husband of
Wife

Father's Name

Mother's Name

Cause of Death { Primary: Dropsy 15-5-a. | Immediate: | How long sick

Accident, Suicide, Homicide

Reported by Transcript 7-1

Address

Must be signed by physician, if any in attendance, otherwise by coroner, undertaker or minister.

LIBRARY BUREAU, 79898